SUMMARY SHEET

Annual Premium Pe	
Coverage Volume (Illinois)* Change 1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto	(3) ercent
Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto	e (+ or -)**
Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto	
3. Liability Other Than Auto	
6. Fidelity	
	
12. Homeowners	
13. Commercial Multi-Peril	
14. Crop Hail 15. Other Earthquake 4.651 -33.6%	
15. Other Earthquake 4,651 -33.6% Line of Insurance	
Does filing only apply to certain territory (territories) or certain classes? If so, specify: No	
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of ISO Revised loss costs and related rules found in filing designation numbers CF-2007-RI CF-2006-RLA1, CF-2006-REQ1 and CF-2006-REQRU	LA1,

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDEPR
MAY 3 0 2008

SPRINGFIELD, ILLINOIS

Employers Mutual Casualty Company

Name of Company

Don Coughennower
Assistant Vice President
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective		7/1/08		
	(1)	(2) Annual Premium	(3) Percent	
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>	
1.	Automobile Liability Private Passenger			
	Commercial			
2.	Automobile Physical Damage Private Passenger Commercial			
•				
3.	Liability Other Than Auto			
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and Machinery		20.604	
9.	Fire	1,855,941	-28.6%	
10.	Extended Coverage	1,270,038	6.4%	
11.	Inland Marine			
12.	Homeowners			
13.	Commercial Multi-Peril			
14.	Crop Hail			
15.	Other Earthquake	27,780	-33.9%	
	Line of Insurance			
			•	
	filing only apply to certain territory (t	erritories) or certain classes? If so, specify:		
No				
			· · · · · · · · · · · · · · · · · · ·	
Adoj	otion of ISO revised loss costs and re-	s rates of an advisory organization, specify of lated rules found in filing designation number	organization): ers CF-2007-RLA1,	
_CF-2	2006-RLA1, CF-2006-REQ1 and CF-	2006-REQRU		

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR

MAY 3 0 2008

SPRINGFIELD, ILLINOIS

Illinois EMCASCO Insurance Company

Name of Company

Don Coughennower
Assistant Vice President
Official - Title